

PATENT

Matter No.: 480032-354

**Applicants: David Cormier; Tracy E. Grim;
Joseph M. Iglesias; Hugo A. Cobar and Janelle
R. Batman**

Title: ADJUSTABLE ERGONOMIC KNEE BRACE

Serial No.: Not Yet Assigned

Filed: September __, 2003

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Mail Stop New Application
Commissioner of Patents
P.O. Box 1450
Alexandria, VA 22313-1450

POWER OF ATTORNEY

Sir:

Royce Medical Company, having become the owner of all rights to the above-identified application by virtue of an Assignment executed by the inventors, the Assignment being submitted with this power of attorney for recording, appoints:

Alan C. Rose, Guy P. Smith, and Joel Voelzke

whose address is:

OPPENHEIMER WOLFF & DONNELLY LLP
233 Wilshire Boulevard, Suite 700
Santa Monica, California 90401
Telephone (310) 319-5456
Fax (310) 319-3508
Attn: Alan C. Rose
Direct Telephone: (310) 319-5456

their attorneys to prosecute this application and to transact in connection with the application all business in the Patent and Trademark Office and before competent International Authorities including the World Intellectual Property Organization.

To the best of my knowledge and belief, title is in the assignee identified above. I am empowered to act on behalf of the assignee.

I declare that all statements made in this document of my own knowledge are true, and that all statements made on information and belief are believed to be true. I make these statements with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. § 1001, and that such willful false statements may jeopardize the validity of the application or any patent issuing from the application.

ROYCE MEDICAL COMPANY

Date: _____, 2003

By _____

Name: _____

Title: _____

DECLARATION AND PETITION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled ADJUSTABLE ERGONOMIC KNEE BRACE, the specification of which is attached hereto.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application of which priority is claimed. N/A.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Please send all correspondence to:
OPPENHEIMER WOLFF & DONNELLY LLP
233 Wilshire Blvd., Suite 700
Santa Monica, CA 90401
Attn: Alan C. Rose
Telephone: (310) 319-5456
Facsimile: (310) 319-3508

Wherefore I pray that Letters Patent be granted to me for the invention or discovery described and claimed in the foregoing specification and claims, and I hereby subscribe my name to the foregoing specification and claims, declaration, and this petition.

Full name of first inventor, if any DAVID CORMIER

Inventor's signature _____ Date _____

Residence 1316 ostrich Hill Road, Oxnard, CA 93036

Citizenship U.S.A.

Post Office Address c/o Royce Medical Products, 742 Pancho Road, Camarillo, CA 93012

Full name of sole or second inventor TRACY E. GRIM

Inventor's signature _____ Date _____

Residence 2867 Florentine Ct., Thousand Oaks, CA 91362

Citizenship U.S.A.

Post Office Address c/o Royce Medical Products, 742 Pancho Road, Camarillo, CA 93012

Full name of third inventor, if any JOSEPH M. IGLESIAS

Inventor's signature _____ Date _____

Residence 1664 Fox Springs Circle, Thousand Oaks, CA 91320

Citizenship U.S.A.

Post Office Address c/o Royce Medical Products, 742 Pancho Road, Camarillo, CA 93012

Full name of fourth inventor, if any HUGO ANTONIO COBAR

Inventor's signature _____ Date _____

Residence 6331 Canby Avenue, Tarzana, CA 91335

Citizenship Guatemala

Post Office Address c/o Royce Medical Products, 742 Pancho Road, Camarillo, CA 93012

Full name of fifth inventor, if any JANELLE RUTH BATMAN
Inventor's signature _____ Date _____
Residence 380 S. Rosemead Blvd., Pasadena, CA 91107
Citizenship U.S.A.
Post Office Address c/o Royce Medical Products, 742 Pancho Road, Camarillo, CA 93012